

RECEIVED  
CENTRAL FAX CENTER  
AUG 05 2005

# Bereskin & Parr

INTELLECTUAL PROPERTY LAW

Scotia Plaza, 40 King Street West, 40th Floor, Toronto, Ontario, Canada M5H 3Y2  
Tel: 416.364.7311 Fax: 416.361.1398 [www.bereskinparr.com](http://www.bereskinparr.com)

TORONTO MISSISSAUGA WATERLOO MONTRÉAL  
FAX TRANSMITTAL

To: U.S. Patent & Trademark Office Central Fax Server  
Attention: Art Unit 3634  
Re: Application Serial No.: 10/612,915  
Fax No.: 1-571-273-8300  
Due Date: (extended) August 6, 2005  
From: Timothy J. Sinnott, Attorney Reg. No. 31,083  
Date: August 5, 2005  
Examiner: Jennifer E. Novosad  
Filed: July 07, 2003  
Pages: 12 (including cover sheet)

COMMENTS:

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the attached **AMENDMENT** and **PETITION FOR EXTENSION OF TIME** are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.



Timothy J. Sinnott  
Registration No.: 31,083

Date: August 5, 2005

RECEIVED  
OIPE/IAP  
AUG 08 2005

RECEIVED  
OIPE/IAP  
AUG 08 2005

If transmission is interrupted or of poor quality, please notify us immediately by calling Nina Schafrick at ext. 3201.

**CONFIDENTIAL**

This communication may contain information that is privileged or confidential and is intended only for the use of the individual to whom it is addressed. Any other distribution, copying or disclosure is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us by mail. Thank you.

PTO/SB/21 (09-04)

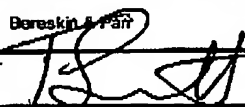
Approved for use through 07/31/2008. OMB 0651-0031

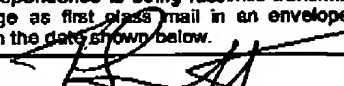
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/612,915	
	Filing Date	07/07/2003	
	First Named Inventor	Duncan F. Campbell	
	Art Unit	3634	
	Examiner Name	Jennifer E. Novosad	
Total Number of Pages in This Submission	12	Attorney Docket Number	149-13

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile cover page with Certification of Facsimile Transmission
<div style="border: 1px solid black; padding: 5px;"> <b>Remarks</b>    </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Bereskin & Parr		
Signature			
Printed Name	Timothy J. Sinnott		
Date	August 5, 2005	Reg. No.	31,063

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Timothy J. Sinnott	Date	August 5, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person should be required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b> Application Number: 10/612915 Filing Date: 07/07/2003 First Named Inventor: Duncan F. Campbell Examiner Name: Jennifer E. Novosad Art Unit: 3634 Attorney Docket No.: 149-13	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL EXAM CENTER AUG 05 2005	
TOTAL AMOUNT OF PAYMENT (\$) 60.00			

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 022095 Deposit Account Name: Bereskin & Parr

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims: \_\_\_\_\_ Extra Claims: \_\_\_\_\_ Fee (\$): \_\_\_\_\_ Fee Paid (\$): \_\_\_\_\_  
 - 20 or HP = 0 x \_\_\_\_\_ = 0.00  
 HP = highest number of total claims paid for, if greater than 20  
 Indep. Claims: \_\_\_\_\_ Extra Claims: \_\_\_\_\_ Fee (\$): \_\_\_\_\_ Fee Paid (\$): \_\_\_\_\_  
 - 3 or HP = 0 x \_\_\_\_\_ = 0.00  
 HP = highest number of independent claims paid for, if greater than 3

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets: \_\_\_\_\_ Extra Sheets: \_\_\_\_\_ Number of each additional 50 or fraction thereof: \_\_\_\_\_ Fee (\$): \_\_\_\_\_ Fee Paid (\$): \_\_\_\_\_  
 - 100 = 0 / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = 0

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Extension of Time (1 month)

60.00

SUBMITTED BY		Registration No.	Telephone
Signature		31,063	(416) 364-7311
Name (Print/Type)	Timothy J. Sinnott	(Attorney/Agent)	Date August 5, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.